

FEB - 5 2010

## 510 (k) Summary

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of 21 CFR 807.92.

The Assigned 510(k) number is: k093005

### 1. Submitter Information

Company name	TaiDoc Technology Corporation
Contact person	Teling Hsu
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Date Prepared	September 27 <sup>th</sup> , 2009

### 2. Name of Device

Proprietary Names	1. FORA G72 Blood Glucose Monitoring System / TD-4264 Blood Glucose Monitoring System 2. FORA G70 Blood Glucose Monitoring System / TD-4273 Blood Glucose Monitoring System 3. Ultra Trak Active Blood Glucose Monitoring System
Common Name	Blood Glucose Test System
Classification Name	Class II devices (21 CFR Section 862.1345)
Product Code	NBW / CGA

### 3. Predicate Device

Trade/Proprietary Name:	CLEVER CHEK TD-4222 No-Code Blood Glucose Monitoring System
Common/Usual Name:	Blood Glucose Test System
Manufacturer	TaiDoc Technology Corporation
510 (k) Number	K090185

#### 4. Device Description

The FORA G72 / TD-4264, FORA G70 / TD-4273, and Ultra Trak Active Blood Glucose Monitoring System are designed to quantitatively measure the concentration of glucose in fresh capillary whole blood. The test principle of system utilizes an electrochemical method-based meter and dry reagent biosensor (test strips) for blood glucose testing. The size of the current is proportional to the amount of glucose present in the sample, providing a quantitative measurement of glucose in whole blood and control solutions.

#### 5. Intended Use

The FORA G72 / TD-4264 Blood Glucose Monitoring System, FORA G70 / TD-4273 Blood Glucose Monitoring System, and Ultra Trak Active Blood Glucose Monitoring System are intended for use in the quantitative measurement of glucose in fresh capillary whole blood samples from the finger and the following alternative sites: the palm, the forearm, the upper-arm, the calf and the thigh. They are intended for use by healthcare professionals and people with diabetes mellitus at home as an aid in monitoring the effectiveness of diabetes control program. They are not intended for the diagnosis of or screening for diabetes mellitus, nor for use on neonates.

The alternative site testing in above systems can be used only during steady-state blood glucose conditions.

#### 6. Comparison to Predicate Device

The intended use, test principle, and operating technology of FORA G72 / TD-4264, FORA G70 / TD-4273, and Ultra Trak Active Blood Glucose Monitoring Systems are all the same as the predicate device. The only difference between the predicate and proposed devices is in engineering modification.

These systems use amperometry for blood glucose measurement. The test is based on the measurement of electrical current generated by the reaction of glucose with reagents of the test strip.

#### 7. Performance Studies

FORA / TD-4264, FORA G70 / TD-4273, and Ultra Trak Active Blood Glucose Monitoring System has the same performance characteristics as the predicate device.

The studies of software verification and validation testing, system accuracy, and meter reliability test demonstrated that the performance of systems meets the intended use.

#### 8. Conclusion

The FORA / TD-4264, FORA G70 / TD-4273, and Ultra Trak Active Blood Glucose

Monitoring Systems demonstrate satisfactory performance and are suitable for the intended use. FORA / TD-4264, FORA G70 / TD-4273, and Ultra Trak Active Blood Glucose Monitoring Systems are substantially equivalent to the predicate device.



DEPARTMENT OF HEALTH & HUMAN SERVICES

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Food and Drug Administration  
10903 New Hampshire Avenue  
Document Mail Center – WO66-0609  
Silver Spring, MD 20993-0002

Taidoc Technology Corp.  
C/O Teling Hsu  
6F, No. 127, Wugong 2<sup>nd</sup> Rd. Wugu Township  
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China (Taiwan)  
248

FEB 5 2010

Re: k093005

Trade/Device Name: FORA G72/TD-4264 Blood Glucose Monitoring System, FORA  
G70/TD-4273 Blood Glucose Monitoring System, Ultra Trak Active Blood Glucose  
Monitoring System

Regulation Number: 21 CFR 862.1345

Regulation Name: Glucose test system

Regulatory Class: Class II

Product Code: NBW, CGA

Dated: December 23, 2009

Received: January 8, 2010

Dear Teling Hsu:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into class II (Special Controls), it may be subject to such additional controls. Existing major regulations affecting your device can be found in Title 21, Code of Federal Regulations (CFR), Parts 800 to 895. In addition, FDA may publish further announcements concerning your device in the Federal Register.

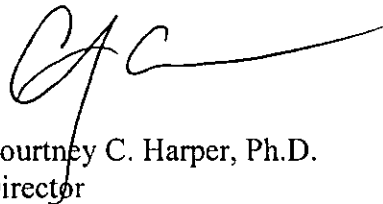
Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21

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If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of *In Vitro* Diagnostic Device Evaluation and Safety at (301) 796-5450. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding postmarket surveillance, please contact CDRH's Office of Surveillance and Biometric's (OSB's) Division of Postmarket Surveillance at (301) 796-5760. For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or ( 301 ) 796-5680 or at its Internet address <http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'CCH', with a long horizontal flourish extending to the right.

Courtney C. Harper, Ph.D.  
Director  
Division of Chemistry and Toxicology  
Office of *In Vitro* Diagnostic Device  
Evaluation and Safety  
Center for Devices and Radiological Health

Enclosure

### Indications for Use

510(k) Number (if known): K093005

Device Name:

FORA G72 / TD-4264 Blood Glucose Monitoring System, FORA G70 / TD-4273 Blood Glucose Monitoring System, and Ultra Trak Active Blood Glucose Monitoring System

Indications for Use:

The FORA G72 / TD-4264 Blood Glucose Monitoring System, FORA G70 / TD-4273 Blood Glucose Monitoring System, and Ultra Trak Active Blood Glucose Monitoring System are intended for use in the quantitative measurement of glucose in fresh capillary whole blood samples from the finger and the following alternative sites: the palm, the forearm, the upper-arm, the calf and the thigh. They are intended for use by healthcare professionals and people with diabetes mellitus at home as an aid in monitoring the effectiveness of diabetes control program. They are not intended for the diagnosis of or screening for diabetes mellitus, nor for use on neonates.

The alternative site testing in above systems can be used only during steady-state blood glucose conditions.

Prescription Use \_\_\_\_\_ AND/OR Over-The-Counter Use X  
(Part 21 CFR 801 Subpart D) (21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER  
PAGE IF NEEDED)

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Concurrence of CDRH, Office of In Vitro Diagnostic Devices (OIVD)

Carol C Benson

Division Sign-off

Office of In Vitro Diagnostic Devices

Evaluation and Safety

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